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Appl. No. : 10/753,115
Applicant : Abbas Ismail Attarwala
Filed : 01/06/2004
TC/A.U. : 2811
Examiner : Douglas W Owens
Docket No. : 1315
Customer No. : 000032528

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

PETITION / REQUEST FOR EXTENSION OF TIME

Applicant hereby petitions for / requests an extension of time under the provisions of 37 CFR 1.136(a) in which to file Applicant's First Amendment. Applicant authorizes and requests that any future reply, requiring a petition for an extension of time for its timely submission, be considered and treated as incorporating a petition for extension of time for the appropriate length of time. This petition / request is to be considered also as authorization to charge all required fees required under 37 CFR Sec. 1.17 to the credit card identified in the accompanying Credit Card Payment Form (PTO -2038).

Respectfully submitted,

N. Eric Jorgensen

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Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Docket Number (Optional)

1315

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Filed 01/06/2004

"Electronic Package and Method

Examiner Douglas W Owens

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>225</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number . I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 37 158

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34

N. Eric Jorgensen
Signature

7/06/2005
Date

N Eric Jorgensen
Typed or printed name

408 929-4058
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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